Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

| CLAIMS AS FILED - PART (Column 1)   |   |   |              |                     | (Column 2)                      |                  | _                  | SMALL ENTITY TYPE |                        | OR | OTHER THAN OR SMALL ENTITY |                        |
|---|---|---|--------------|---------------------|---------------------------------|------------------|--------------------|-------------------|------------------------|----|----------------------------|------------------------|
| TOTAL CLAIMS  |   |   | 16           |                     |                                 |                  |                    | RATE              | FEE                    |    | RATE                       | FEE                    |
| FOR   |   |   | NUMBER FILED |                     | NUMBE                           | R EXTRA          | E                  | BASIC FEE         | 370.00                 | OR | BASIC FEE                  | 740.00                 |
| TOTAL CHARGEABLE CLAIMS   |   |   | /6 minus 20= |                     | *                               |                  |                    | X\$ 9=            |                        | OR | X\$18=                     |                        |
| IND   | EPENDENT CL   | AIMS  | 7 minus 3 =  |                     | *                               | ·                | t                  | X42=              |                        | OR | X84=                       |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |   |   |              |                     |                                 |                  | t                  | +140=             |                        | OR | +280=                      |                        |
| * If the difference in column 1 is less than zero, ente                               |   |   |              |                     | r "0" in c                      | olumn 2          | L                  | TOTAL             |                        | OR | TOTAL                      |                        |
|   | CI  | LAIMS AS A                                  | MENDED       | - PAR               | T II                            |                  |                    |                   |                        |    | OTHER                      | THAN                   |
|   |   | (Column 1)                                  |              | (Colu               |                                 | (Column 3)       |                    | SMALL E           |                        | OR | SMALL                      |                        |
| AMENDMENT A   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   | 8"           | NUM<br>PREVI        | HEST<br>IBER<br>OUSLY<br>FOR    | PRESENT<br>EXTRA |                    | RATE              | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total   | *   | Minus        | **                  |                                 | =                |                    | X\$ 9=            |                        | OR | X\$18=                     |                        |
|   | Independent   | *   | Minus        | ***                 | T.O. 411.                       | =                |                    | X42=              |                        | OR | X84=                       |                        |
| L   | FIRST PRESE   | NTATION OF M                                | ULTIPLE DEF  | PENDEN              | CLAIM                           |                  |                    | +140=             |                        | OR | +280≒                      |                        |
|   |   |   |              |                     |                                 |                  | L                  | TOTAL             |                        | OR | TOTAL<br>ADDIT. FEE        |                        |
|   |   | Α   | ADDIT. FEE   |                     | •                               | ADDIT. FEE       |                    |                   |                        |    |                            |                        |
| AMENDMENT B   | p   | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |              | HIGI<br>NUM<br>PREV | IMN 2) HEST MBER IOUSLY FOR     | PRESENT<br>EXTRA |                    | RATE              | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total   | *   | Minus        | **                  |                                 | =                |                    | X\$ 9=            |                        | OR | X\$18=                     |                        |
|   | Independent   | *   | Minus        | ***                 |                                 | =                |                    | X42=              |                        | OR | X84=                       |                        |
| Ľ   | FIRST PRESENTATION OF MULTIPLE DEPENDEN   |   |              |                     | T CLAIM                         |                  | <b>!</b>           | +140=             |                        | OR | +280=                      |                        |
|   |   |   |              |                     |                                 |                  | L                  | TOTAL             |                        | OR | TOTAL<br>ADDIT. FEE        |                        |
|   |   | (Column 1)                                  |              | (Colu               | ımn 2)                          | (Column 3)       | ,                  | ADDIT. FEE        |                        | •  | AUUII. FEE                 |                        |
| AMENDMENT C   |   | CLAIMS REMAINING AFTER AMENDMENT            |              | HIG<br>NUI<br>PREV  | HEST<br>MBER<br>TOUSLY<br>D FOR | PRESENT<br>EXTRA |                    | RATE              | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total   | *   | Minus        | **                  |                                 | =                |                    | X\$ 9=            |                        | OR | X\$18=                     |                        |
| ME  | Independent   | *   | Minus        | ***                 |                                 | -                |                    | X42=              |                        | OR | X84=                       |                        |
| ال  | FIRST PRESENTATION OF MULTIPLE DEPENDEN   |   |              |                     | IT CLAIN                        |                  | ¹ ႃ <mark>ႃ</mark> | +140=             |                        | OR | +280=                      |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |   |              |                     |                                 |                  |                    |                   |                        | 1  | TOTAL                      |                        |
| **  | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |              |                     |                                 |                  |                    |                   |                        |    |                            |                        |